

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09/857873

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
101		1					51					
102		1					52					
103		1					53					
104							54					
105							55					
106							56					
107							57					
108							58					
109							59					
110							60					
111							61					
112							62					
113							63					
114							64					
115							65					
116							66					
117							67					
118							68					
119							69					
120							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	3	↓		↓		↓	TOTAL IND.		↓		↓	↓
TOTAL DEP.	100	↓		↓		↓	TOTAL DEP.		↓		↓	↓
TOTAL CLAIMS	103						TOTAL CLAIMS					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51		/				
2		/					52		/				
3		/					53		/				
4		/					54		/				
5		/					55		/				
6		/					56		/				
7		/					57		/				
8		/					58		/				
9		/					59		/				
10		/					60		/				
11		/					61		/				
12		/					62		/				
13		/					63		/				
14		/					64		/				
15		/					65		/				
16		/					66		/				
17		/					67		/				
18		/					68		/				
19		/					69		/				
20		/					70		/				
21		/					71		/				
22		/					72		/				
23		/					73		/				
24		/					74		/				
25		/					75		/				
26		/					76		/				
27		/					77		/				
28		/					78		/				
29		/					79		/				
30		/					80		/				
31		/					81		/				
32		/					82		/				
33		/					83		/				
34		/					84		/				
35		/					85		/				
36		/					86		/				
37		/					87		/				
38		/					88		/				
39		/					89		/				
40		/					90	/	/				
41		/					91		/				
42		/					92		/				
43		/					93		/				
44	/						94		/				
45		/					95		/				
46		/					96		/				
47		/					97		/				
48		/					98		/				
49		/					99		/				
50		/					100		/				
TOTAL IND.		↓		↓		↓	TOTAL IND.	3	↓		↓		↓
TOTAL DEP.		↓		↓		↓	TOTAL DEP.	4	↓		↓		↓
TOTAL CLAIMS							TOTAL CLAIMS	7					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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